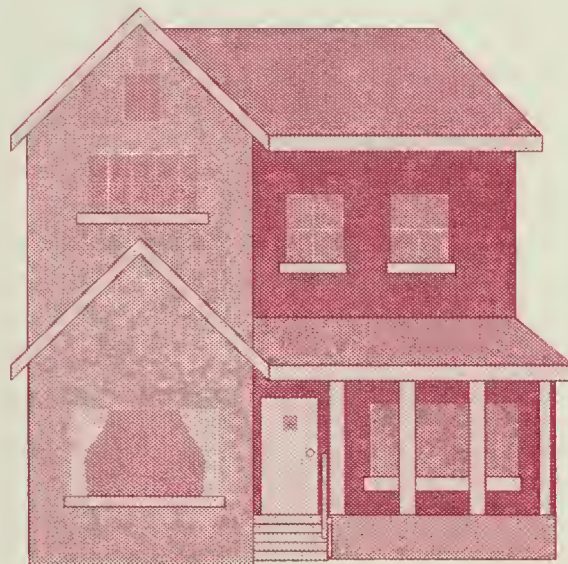


PERSONAL CARE HOMES IN MONTANA



A CONSUMER'S GUIDE

STATE DOCUMENTS COLLECTION

JUN 24 2002

MONTANA STATE LIBRARY
1015 E. Gth AVE.
HELENA, MONTANA 59620

Montana's Ombudsman Program
Senior and Long Term Care Division
Department of Public Health and Human Services

April 22, 1999

MONTANA STATE LIBRARY



3 0864 1001 5339 7

Personal Care Homes in Montana

A Consumer's Guide

INTRODUCTION: This is a consumer guide intended for senior citizens, family members and providers seeking more information about personal care homes in Montana. To better understand the important role personal care homes play in providing care, the consumer should be aware of the various residential care options available in the state.





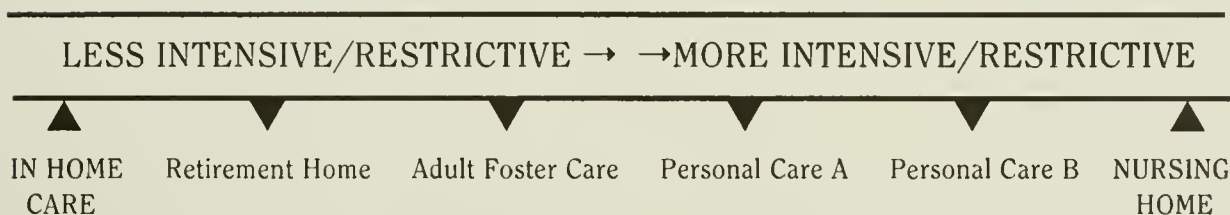
Digitized by the Internet Archive
in 2010 with funding from
Montana State Library

<http://www.archive.org/details/personalcarehome1999mont>

RESIDENTIAL CARE OPTIONS As people continue to search for alternative housing arrangements when they need assistance with care, new levels of care have evolved called residential care facilities. It also is called by some as, personal care homes, board and care homes, assisted living facility, adult foster care homes, etc. Given the large demand for alternatives to home care services and nursing home care, new residential care options are springing up at a fast rate. Many new providers are starting both small and large facilities that are offering a wide range of different philosophies of care and models of service.

Residential care options are part of the long term care continuum. They tend to serve people who are more dependent in terms of assistance or supervision than those living at home and receiving services from an agency like a home health agency or through the Aging Network. They tend to serve people who are less dependent than those living in nursing homes. The diagram below illustrates the continuum of long term care options.

CONTINUUM OF CARE



The common thread that runs through all these services is that they are provided in a congregate setting and they assist the person in remaining independent. Assistance can range from simply meals and laundry services in retirement homes to limited nursing home type care in personal care homes.

DEFINING OPTIONS

People are generally familiar with the type of services offered by a nursing home or a home health agency. Because of the newness of residential care options, consumers may not know what to expect. The following are some definitions of each of the options. There is a great variety within each area regarding size of facilities, types of living arrangements they provide and the scope of services they provide.

Retirement Home: Most settings have individual apartments for residents, increasing independence and privacy. The home should offer meals or a central kitchen but may not offer nursing or personal care services to the residents, other than by a contract with a third party.

Personal Care Home A: These facilities are more communal in nature than assisted living type facilities. Residents usually have a single or double bedroom they live in. Services center around providing needed assistance with activities of daily living (e.g., eating, bathing, dressing, grooming, etc.), medication management and general supervision of residents. **(Additional Information provided in this Consumer Guide)**

Adult Foster Care: The hallmark of this option is the small family setting (up to four residents) in which personal care services are provided. Other than size, the services provided in adult foster care are very similar to those in a Personal Care Home A.

Personal Care Home B: Residents at this level can have care needs that approach nursing home level needs. Because of this, more formalized requirements exist regarding oversight by a physician and assessment and care planning for care needs. The number of residents are also limited to no more than five. Facilities can provide both A and B levels of care within the same home if they want. **(Additional Information provided in this Consumer Guide)**

Assisted Living: Assisted living is sometimes used to describe the full spectrum of residential care options. Most frequently it is used to describe a variation of a personal care home. Facilities providing assisted living are usually licensed as a personal care home. Because there is no specific licensing category, there is great variation on how services are delivered by providers. Nationally, there are two hallmarks that distinguish assisted living from Personal care homes:

- ☛ individual units with bathroom and kitchen facilities allowing greater privacy for residents; and
- ☛ a greater level of independence and control for residents in determining how personal care assistance they receive. Personal care services are provided by centralized staff. Some facilities specialize in providing services to people with physical impairments, while others may target services to the elderly.

Residential Hospice A new option that is currently available only in Missoula. This option specializing in providing palliative care services to those who are terminally ill. There are also other kinds of hospice services available in the home and other settings.

COST

The vast majority of residents living in these options are private pay.

- ☛ There are some federal (HUD) subsidies for people living in retirement homes or assisted living settings for persons with physical impairments.
- ☛ Medicaid assistance is available on a limited basis in adult foster care personal care homes and residential hospice facilities. The Home and Community Based Services Program, often called the Medicaid Waiver, is the only Medicaid source of payment for these services.
- ☛ Residents of retirement homes may also qualify for additional assistance from Medicaid for health care needs.

Residential care options are, most of the time, less expensive than nursing home care, but not always. Costs vary greatly across the state and from facility to facility.

QUALITY ASSURANCE

All of the above described options are licensed by the state. State standards spell out what level of services facilities must provide. They also set standards for when residents can no longer safely be served and must move to a higher level of care. In general, the greater the care needs and vulnerability of residents, the greater the regulatory requirements a licensing category must meet.

It is important to seek out a licensed facility. A facility should be able to show you a current license. It's your guarantee that the facility is meeting minimum standards, but does not assure the consumer of the quality of the care provided. If you have problems, there are specific criteria that govern care and state agencies available to enforce these standards. Some facilities may be operating without a license. You enter them at your own risk. If you have problems, it will be harder to get them corrected. Licensure is a relatively simple and inexpensive process.

To find out if a facility has a current license, contact the Licensing Bureau, Montana Department of Public Health and Human Services at (406)444-2676.

ABOUT PERSONAL CARE HOMES

What is a personal care home? A personal care home is a residential option which provides room, meals, help with activities of daily living, and some degree of supervision. It is not a nursing home, but some residents receive care that might resemble nursing home care. Sometimes they are called domiciliary care homes, board and care homes, community residence facilities, assisted living facilities or rest homes. They are licensed by the State of Montana as personal care homes.

What services should I expect? There are five categories of services that all personal care homes must provide. Additional services are also available, especially as our needs change. The minimum services you can expect in every personal care home are:

- 1) **Residential Services** - laundry, housekeeping, food service, and either providing or making available provisions for local transportation.
- 2) **Personal Assistance Services** - such as assistance by staff required by residents in eating, walking, dressing, grooming, and similar routine living tasks;
- 3) **Recreation Activities** - such as movies, games, speakers, outside excursions, etc.
- 4) **Supervision of Self-medication** - a reminder by staff of when and what medications the resident should be taking.
- 5) **An Electric Call System for Emergencies** - every facility should have a system that provides safety and security to the resident.

What are the Two levels of Care in Personal Care Homes? Personal Care Homes can provide two levels of care (Level "A" and Level "B"):

"A" Personal Care Home - Services center around providing needed assistance with activities of daily living (assistance with eating, bathing, dressing, grooming, etc.) Medication management and general supervision of residents.

ABOUT PERSONAL CARE HOMES

The Criteria to live in Level "A"

- Be ambulatory - Person is capable of self mobility either with or without mechanical assistance. The resident is able to exit without assistance.
- Be able to self-medicate - able to take one's own medications with limited assistance from staff.
- Not incontinent - Being incontinent is when a resident does not have control of bowel and bladder functions.
- Not in need of medical, physical or chemical restraints.
- Not in need of more than 20 consecutive days of nursing care. Allows for short term nursing care or home health care under the supervision of a licensed registered nurse on a 24 hour basis, that prevents hospitalization.

"B" Personal Care Home

- Residents at this level can have care needs that approach nursing level needs. Because of this, more formalized requirements exist regarding oversight by a physician and assessment and care planning for care needs.
- There must be a formal assessment of care needs.
- There must be a signed statement by a physician agreeing to the resident's admission and reviewed on a quarterly basis if the resident is:
 - in need of skilled nursing;
 - in need of medical, physical, or chemical restraint;
 - non-ambulatory or bedridden;
 - incontinent to the extent that bowel or bladder control is absent;
 - unable to self-administer medications.
- Nursing services must be supervised by a qualified health professional (physician, physician assistant, a nurse practitioner, registered nurse), with a signed statement that is renewed at least quarterly after visiting the facility and that has certified that the needs of the resident can be adequately met in the facility.

The number of residents at "B" level are limited to 5 in any home. Facilities can provide both "A" and "B" levels of care within the home and the license must reflect the number of both "A" and "B" residents.

PC HOME CHECK LIST

What to Look for? The following are basic recommendations on what to look for when visiting a personal care home, also applies to an adult foster home:

<p>Is the home licensed by the State of Montana?</p> <p>* All Personal Care Homes should have a current license posted and available to the consumer. The license will specify how many "A" and "B" residents.</p>	<u>Home 1.</u>	<u>Home 2.</u>
<p>* Is the home neat, clean, safe and in good repair? When taking a tour of the home, look for the these:</p> <p>* Are the floors and furniture clean?</p> <p>* Are there noticeable odors?</p> <p>Does the home appear safe?</p> <p>* Are there noticeable dangers for trips and falls by residents and staff?</p> <p>* Are there stairs that make it difficult or unsafe in the event of fire?</p> <p>* Are their fire exits, extinguishers, smoke detectors and exits identified?</p> <p>* Is the home as neat and clean as you are accustomed to?</p>		

<p>Is there enough qualified staff to provide care to the residents?</p> <p>How large of a building is the home?</p> <p>What are the physical and social activities offered by the home?</p> <p>What do the current residents think of the home?</p> <ul style="list-style-type: none"> * Are the residents treated with dignity and respect? <p>Do the home rules suit my lifestyle?</p> <ul style="list-style-type: none"> * Do they allow pets? * Smoking or alcohol? * Visitors? <p>What are the sleeping rooms like in the home?</p> <ul style="list-style-type: none"> * Will there be room for my furniture? * Do I share a room with someone? 	<p><u>Home 1.</u></p>	<p><u>Home 2.</u></p>
<p>What do the meals look like being served while you are visiting the facility?</p> <ul style="list-style-type: none"> * Is the menu posted for the residents to see? * Do the meals look appetizing? * Do the residents have assistance with eating? * Are their snacks available during the day? * Will they prepare special meals? * Can you have guests or family stay for meals? * Is there an alternate meal provided? 		

PERSONAL CARE HOMES

What should be in the contract or admissions agreement? Before you can begin living in a home, you and the management should agree on each others rights and responsibilities. Every resident of a personal care home should have a written contract (Admissions Agreement) that documents what the cost are and what services are to be provided, as follows:

- The facilities representative should help explain provisions of the agreement and the application process. If you do not understand it, don't sign it.
- The home should have a formal application process that gathers needed information about you as a prospective resident. The information they must have is you name, address, sex, social security number, date of birth, marital status, insurance or financial, etc. The application should include whether the prospective resident has any health care decision making instruments in effect.
- The written application process and the admission agreement must include a statement that informs the resident of the requirement for a personal care home placement.
- You do not have to have someone else (a third party guarantor) co-sign your admission agreement or take on any responsibility for paying your bills at the home.
- The Admissions Agreement should have the complete list of all services, supplies and equipment and the cost for each. Must include the charges to your medical insurance, what Medicaid or Medicare will cover, if any, and the charges you will have to pay for yourself.
- The Admission Agreement should state that if the rates or charges change, the home must let you know 30 days in advance.

- The Admission Agreement should state what services will be provided by the personal care home's staff and what services will be provided by an outside provider.
- The Admissions Agreement should state the term of the contract, when the contract can be revoked, and how you will be billed for services.
- The home must provide an itemized monthly bill if you ask for one;
- The refund policy;
- How transfers and discharges will be handled by the home;
- Complaint resolution process; and
- The home's rules and if pets are allowed in the home.

PERSONAL CARE HOMES

How do I pay for care? All basic services and living costs for personal care homes are paid by the resident from their own personal resources. There are limited opportunities for payment by the Home and Community Based Services Program. This program provides for Medicaid payment for some residential care. See your local Human Services Office for application.

Basic Rights of an Resident, what are they?

The home must inform you, both orally and in writing, of your rights and responsibilities when you first enter and at least once a year thereafter. All rights should be explained in the Admissions Agreement. As a personal care home resident, your lifestyle has changed but your rights as a citizen have not. Your personal rights, the rights of other residents and the rights of the facility and its staff all intermix in the personal care home setting. The responsibility for arriving at a workable balance of these rights is one you share with other residents and the staff of the home. The Basic categories of your rights are:

- **Rights to information** - Admission Agreement, medical information, access to records, discharge policy, etc.
- **Rights concerning daily care issues** - resident assessment, a care plan, choice of doctor, refusal of care or treatment, calling for help, adequate staffing, food service, special diets, etc.
- **Rights regarding liberty and privacy** - privacy during care and treatment, room privacy, courtesy and respect, freedom from abuse, personal possessions, having visitors, etc.

PERSONAL CARE HOMES

How do I resolve problems? Most facilities want to hear about problems and will work with the resident and family to resolve them. If you are unable or unwilling to voice your complaints to the home, there are Certified Local Ombudsman that visit personal care homes and nursing homes across the state. Because of their training on resident rights, your local Ombudsman may be helpful to you in resolving complaints. Every home should have a poster stating the name of the local Ombudsman and telephone number, as well as the State Ombudsman.

The Ombudsman Program The major focuses of the Ombudsman Program is help resolve complaints, advocate for residents rights, and educate consumers about regulations. For more information and assistance, contact:

Montana's Area Agencies on Aging - 1800-551-3191

and Ask for your Local Certified Ombudsman

(The local Ombudsman's name and phone number should be posted in each facility)

OR

State Long Term Care Ombudsman

Department of Public Health and Human Services

P.O. Box 4210

Helena MT 59604

1-800-332-2272 (In Montana)

(406)444-4676

Acknowledgements

Bob Bartholomew, Editor
State Long Term Care Ombudsman
Senior and Long Term Care Division
Montana Department of Public Health and Human Services

Content Review

Roy Kemp, Chief
Harry Dziak, Health Facility Surveyor
Licensing Bureau, Quality Assurance Division
Montana Department of Public Health and Human Services

Hilke Faber, Health Representative
American Association of Retired Persons
Seattle, Washington

Joyce DeCunzo, Chief
Community Services Bureau
Senior and Long Term Care Division
Montana Department of Public Health and Human Services

Debbie Horton, Pension Counselor
Aging Services Bureau
Senior and Long Term Care Division
Montana Department of Public Health and Human Services

Distribution and Outreach

Montana's Area Agencies on Aging Directors and Staff
Montana's Certified Local Ombudsmen

Funded in Part by the Federal Older Americans Act funds.

4,000 copies of this public document were published at an estimated cost of 70¢ per copy, for a total cost of \$2,800.00, which includes \$2,800.00 for printing and \$.00 for distribution.

Notes

